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Chapter you are filing under:	
☐ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
Chapter 13	☐ Check if this an amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Eugene First name A. Middle name Moeller Last name and Suffix (Sr., Jr., II, III)	Marjorie First name A. Middle name Moeller Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9920	xxx-xx-2999

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Debtor 1 Eugene A. Moeller Debtor 2 Marjorie A. Moeller

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	4502 Mayfair Drive	If Debtor 2 lives at a different address:			
		Johnsburg, IL 60051 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		McHenry				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Deb	otor 2 Marjorie A. Moelle	r				Case no	Case number (if known)			
Par	t 2: Tell the Court About	our Bank	runtov Ca	se.						
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check on	ne. (For a b 010)). Also, ter 7	orief description of each, s go to the top of page 1 ar			C. § 342(b) for Individu	uals Filing for Bankruptcy		
		☐ Chap	ter 12							
		■ Chap	ter 13							
8.	How you will pay the fee	abo ord a p	out how yo der. If your ore-printed	u may pay. Typically, if yo attorney is submitting you address.	ou are paying ir payment on	the fee yourself, y your behalf, your	ou may pay with cash attorney may pay with	local court for more details cashier's check, or money a credit card or check with		
				the fee in installments. e in Installments (Official		this option, sign	and attach the Applica	ation for Individuals to Pay		
		☐ I re	equest that t is not requiplies to you	t my fee be waived (You uired to, waive your fee, a	may request and may do so unable to pay	only if your incom the fee in installn	ne is less than 150% onents). If you choose t	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out your petition.		
9. Have you filed for ☐ No. bankruptcy within the										
	last 8 years?	Yes.								
			District	Rockford, IL	When	8/22/12	Case number	12-83222		
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.								
			Debtor				Relationship to y	ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y			
			District		When		Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to li	ine 12.						
		☐ Yes.	Has yo	ur landlord obtained an e	viction judgme	ent against you?				
				No. Go to line 12.						
				Yes. Fill out <i>Initial Stater</i> , this bankruptcy petition.	nent About an	Eviction Judgmei	nt Against You (Form	101A) and file it as part of		

Eugene A. Moeller

Debtor 1 Debtor 2 Case 18-81708 Doc 1 Filed 08/10/18 Entered 08/10/18 14:12:49 Desc Main Document Page 4 of 65

Deb	otor 2 Marjorie A. Moelle	er			Case number (if known)		
Par	Report About Any Bu	ısinesses	You Owr	n as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	е		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir ns, cash-f	ndicate that you are low statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	I am ı	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where i	s the property?			
					Number, Street, City, State & Zip Code		

Debtor 1

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Debtor 1 Eugene A. Moeller
Debtor 2 Marjorie A. Moeller

Case number (if known)

15. Tell the court whether

Part 5:

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-81708 Doc 1 Filed 08/10/18 Entered 08/10/18 14:12:49 Desc Main Document Page 6 of 65

	otor 1 otor 2	Eugene A. Moeller Marjorie A. Moelle		Boodment		Case number (i	if known)	
Par	t 6:	Answer These Questi	ons for Re	porting Purposes				
16.	Wha	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. ■ Yes. Go to line 17.				
			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.				
			16c.	State the type of debts you owe t	that are not consumer d	ebts or business o	debts	
17.		ou filing under oter 7?	■ No.	I am not filing under Chapter 7. G	Go to line 18.			
	after prop admi are p be av distr	ou estimate that any exempt erty is excluded and nistrative expenses laid that funds will vailable for ibution to unsecured itors?	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab No Yes			ty is excluded and administrative expenses	
18.		many Creditors do estimate that you	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	estin	much do you nate your assets to orth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 □ \$10,000,001 - \$50 □ \$50,000,001 - \$10 □ \$100,000,001 - \$	0 million 00 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.		much do you nate your liabilities ?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10 \$10,000,001 - \$50 \$50,000,001 - \$10 \$100,000,001 - \$1	0 million 00 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Par	t 7:	Sign Below						
For	you		I have exa	amined this petition, and I declare	under penalty of perjur	y that the informa	tion provided is true and correct.	
				hosen to file under Chapter 7, I arates Code. I understand the relief			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.	
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
			I request	relief in accordance with the chap	eter of title 11, United Sta	ates Code, specifi	ed in this petition.	
			bankrupto and 3571	cy case can result in fines up to \$2	250,000, or imprisonme	nt for up to 20 yea	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,	
			Eugene	ne A. Moeller A. Moeller of Debtor 1	Mai	Marjorie A. Moor rjorie A. Moelle nature of Debtor 2	er	
			Executed	on August 10, 2018 MM / DD / YYYY	Exe	cuted on Augu MM / I	nst 10, 2018 DD / YYYY	

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Debtor 1 Debtor 2	Eugene A. Moeller Marjorie A. Moeller		Page 7 of 65	ase number (if known)	
represent If you are	attorney, if you are ed by one not represented by ey, you do not need	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unifor which the person is eligible. I also certify and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.	ted States Code, and have that I have delivered to the	e explained the relief average e debtor(s) the notice re	vailable under each chapter equired by 11 U.S.C. § 342(b)
	. •	/s/ Scott A. Bentley Signature of Attorney for Debtor	Date	August 10, 201 MM / DD / YYYY	8

Email address

Scott A. Bentley
Printed name

6191377 ILBar number & State

Law Office of Scott A. Bentley

5435 Bull Valley Road Suite 318

McHenry, IL 60050

Number, Street, City, State & ZIP Code

Contact phone **815-385-0669**

scottbentleylaw@gmail.com

		1200:11111	<u>-: Paue 6 01 05</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Eugene A. Moelle	er		
	First Name	Middle Name	Last Name	
Debtor 2	Marjorie A. Moelle	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
		value 0	or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,650.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,650.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	33,280.06
	Your total liabilities	\$	33,280.06
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,603.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,534.75
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

		Document	Page 9 of 65	
	Eugene A. Moeller		3	
Debtor 2	Marjorie A. Moeller		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 800.22

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	To	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1 Debtor 2 Spouse, if: United S Case nui	First Name Marjorie A. Moelle filing) First Name States Bankruptcy Court for the:	Middle Name Last Name		
Debtor 2 Spouse, if United S Case nui	First Name Marjorie A. Moelle filing) First Name States Bankruptcy Court for the:	Middle Name Last Name Pf Middle Name Last Name		
Spouse, if I Jnited S Case nui	Marjorie A. Moelle filing) First Name States Bankruptcy Court for the:	Middle Name Last Name		
Spouse, if United S Case nui	filing) First Name States Bankruptcy Court for the:	Middle Name Last Name		
United S Case nui	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case nui		NORTHERN DISTRICT OF ILLINOIS		
Officia	mber			
_				☐ Check if this is an
_				amended filing
_	al Farma 400A/D			
ろしけて	<u>al Form 106A/B</u> edule A/B: Prop	ortv		40/45
		e items. List an asset only once. If an asset fits in more than		12/15
nformatio Inswer ev	on. If more space is needed, attach very question.	te as possible. If two married people are filing together, both a separate sheet to this form. On the top of any additional particles are the controlled to the second second second second second second second second sec		
Part 1:	Describe Each Residence, Building	, Land, or Other Real Estate You Own or Have an Interest In		
. Do you	ı own or have any legal or equitable	interest in any residence, building, land, or similar property?	?	
■ No.	Go to Part 2.			
_	. Where is the property?			
□ 165.	. Where is the property?			
Part 2:	Describe Your Vehicles			
□ No ■ Yes	5			
3.1 Ma	lake: Ford	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	•
Me	lodel: Fusion	Debtor 1 only	Creditors Who Have Clair	
Υe	ear: 2010	Debtor 2 only	Current value of the	Current value of the
Ap	pproximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
_	ther information:	At least one of the debtors and another		
	ocation: 4502 Mayfair Drive, ohnsburg IL 60051	Check if this is community property (see instructions)	\$4,600.00	\$4,600.00
3.2 Ma	lake: Ford	Who has an interest in the property? Check one	Do not deduct secured cla	
	lodel: Focus	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	ear: 2000	Debtor 2 only		
Ar	pproximate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	other information:	☐ At least one of the debtors and another	ppry .	
17	ocation: 4502 Mayfair Drive,			
\	ohnsburg IL 60051	Check if this is community property (see instructions)	\$800.00	\$800.00
		(See mandellons)		

Official Form 106A/B Schedule A/B: Property page 1

☐ Yes

Do	ebtor 1	Case 18-8		Doc 1	Filed 08/10/18 Document	Entered 08/10/18 14:1 Page 11 of 65	L2:49	Desc Main
		Marjorie A. I				Case number	(if known)	
						om Part 2, including any entries fo		\$5,400.00
		cribe Your Perso						
					est in any of the follow	ring items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example:	Id goods and f s: Major appliar Describe			ina, kitchenware			
					and Furnishings yfair Drive, Johnsb	urg IL 60051		\$700.00
	□No	s: Televisions a			stereo, and digital equi ia players, games	oment; computers, printers, scanners	s; music co	ollections; electronic devices
				and printer n: 4502 Ma	yfair Drive, Johnsb	urg IL 60051]	\$150.00
	Example:	les of value s: Antiques and other collecti				oks, pictures, or other art objects; sta	amp, coin,	or baseball card collections;
	Examples	nt for sports a s: Sports, photo musical instru	graphic, ex		ther hobby equipment;	bicycles, pool tables, golf clubs, skis	; canoes a	nd kayaks; carpentry tools;
	■ No □ Yes. [Describe						
	■ No		s, shotguns	, ammunition	, and related equipmen	t		
	□ No É	es: Everyday cl	othes, furs,	leather coats	s, designer wear, shoes	, accessories		
				g Apparel n: 4502 Ma	yfair Drive, Johnsb	urg IL 60051		\$100.00
	■ No		welry, costu	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches	s, gems, g	old, silver
13.	Non-farr Example ■ No	Describe n animals es: Dogs, cats, Describe	birds, horse	es				

	Case 18-81		oc 1	Filed 08/10/18 Document	Entered 08/10 Page 12 of 65	0/18 14:12:49	Desc Main
Debtor 1 Debtor 2	Eugene A. Moe Marjorie A. Moe				C	ase number (if known)	
■ No	ther personal and he		ems you d	did not already list, i	ncluding any health ai	ds you did not list	
				n Part 3, including a	ny entries for pages y	ou have attached	\$950.00
	escribe Your Financial						
Do you o	wn or have any lega	l or equitabl	e interes	t in any of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have	-			osit box, and on hand w	hen you file your petitic	n
						Cash Location: 4502 Mayfair Drive, Johnsburg IL 60051	\$200.00
□ No ■ Yes.				unts with the same ins Institution r Fifth Thir 2121 N. R	name:		
	•	17.1. Chec	king	McHenry,	, IL 60050		\$100.00
Exam ■ No □ Yes.		estment acco	ounts with	brokerage firms, mor		including an interest	in an LLC, partnership, and
joint v ■ No	venture				orporated businesses	, moluding an interest	. III ali LLO, partilei silip, aliu
☐ Yes.	Give specific inform	ation about t Name of e				% of ownership:	
Negot Non-ri ■ No	<i>tiable instrument</i> s incl	lude persona s are those y	l checks, ou canno nem	cashiers' checks, pro	egotiable instruments missory notes, and mor by signing or delivering	ney orders.	
	ment or pension acouples: Interests in IRA		ogh, 401(k	x), 403(b), thrift saving	s accounts, or other pe	nsion or profit-sharing p	olans
	List each account se	eparately. Type of accor	unt:	Institution r	name:		

Case 18-81708 Doc 1 Filed 08/10/18 Entered 08/10/18 14:12:49 Desc Main Page 13 of 65 Document Debtor 1 Eugene A. Moeller Debtor 2 Marjorie A. Moeller Case number (if known) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

☐ Yes. Give specific information..

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Debt Debt		Eugene A Marjorie A		Boodinen	t rugo 14 or	Case number (if known)	
						_	
ı	Examp		d parties, whether or a s, employment disputes		awsuit or made a dema rights to sue	and for payment	
	No Yes.	Describe eac	ch claim				
34. C	Other c	ontingent ar	nd unliquidated claim	s of every nature, inc	luding counterclaims	of the debtor and rights to s	et off claims
	No						
	Yes.	Describe eac	ch claim				
35. A	ny fina	ancial assets	s you did not already	list			
	No						
	Yes.	Give specific	information				
36.			•	•	ing any entries for pag		\$300.00
Part :	5: Des	cribe Any Bus	siness-Related Property	You Own or Have an Int	erest In. List any real esta	ate in Part 1.	
37. D	o you o	wn or have an	y legal or equitable inte	est in any business-rela	ated property?		
	No. Go	to Part 6.					
	Yes. G	o to line 38.					
Part (m- and Commercial Fish an interest in farmland, lis		ou Own or Have an Interes	st In.	
46. D	o you	own or have	e any legal or equitab	e interest in any farm	n- or commercial fishir	ng-related property?	
I	No. (Go to Part 7.	, ,	•			
ı	☐ Yes.	Go to line 47.					
		_					
Part 7	7:	Describe All	Property You Own or Ha	ve an Interest in That Y	ou Did Not List Above		
			property of any kind y		st?		
		les: Season t	ickets, country club me	mbership			
	l No l Yes (Give specific	information				
	1 100. (Sive opeomo	inomation			_	
54.	Add th	ne dollar valı	ue of all of your entrie	s from Part 7. Write t	hat number here		\$0.00
Part	8:	List the Totals	s of Each Part of this For	m			
55.	Part 1	: Total real e	state, line 2				\$0.00
56.	Part 2	: Total vehic	les, line 5		\$5,400.00		
57.	Part 3	: Total perso	onal and household it	ems, line 15	\$950.00		
			cial assets, line 36		\$300.00		
			ess-related property,		\$0.00		
			and fishing-related p	• •	\$0.00		
61.	Part 7	: I otal other	property not listed, l	ne 54	+ \$0.00		
62.	Total _l	personal pro	pperty. Add lines 56 thi	ough 61	\$6,650.00	Copy personal property total	al \$6,650.00
63.	Total	of all proper	ty on Schedule A/B. A	dd line 55 + line 62			\$6,650.00

Schedule A/B: Property Official Form 106A/B page 5

		17(1(1)111)	111 FAUE 1.3 ULUS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Eugene A. Moelle	er		
	First Name	Middle Name	Last Name	
Debtor 2	Marjorie A. Moell	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	he Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2010 Ford Fusion Location: 4502 Mayfair Drive,	\$4,600.00		\$2,400.00	735 ILCS 5/12-1001(c)
Johnsburg IL 60051 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2000 Ford Focus Location: 4502 Mayfair Drive,	\$800.00		\$800.00	735 ILCS 5/12-1001(c)
Johnsburg IL 60051 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Household Goods and Furnishings Location: 4502 Mayfair Drive,	\$700.00		\$700.00	735 ILCS 5/12-1001(b)
Johnsburg IL 60051 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Laptop and printer Location: 4502 Mayfair Drive,	\$150.00		\$150.00	735 ILCS 5/12-1001(b)
Johnsburg IL 60051 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Wearing Apparel Location: 4502 Mayfair Drive,	\$100.00	•	\$100.00	735 ILCS 5/12-1001(a)
Johnsburg IL 60051			100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 11.1			· •	

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Marjorie A. Moeller Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Location: 4502 Mayfair Drive, 100% of fair market value, up to Johnsburg IL 60051 Line from Schedule A/B: 16.1 any applicable statutory limit **Checking: Fifth Third Bank** 735 ILCS 5/12-1001(b) \$100.00 \$100.00 2121 N. Richmond Road McHenry, IL 60050 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17.1 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

Fill in this infor					
Debtor 1	Eugene A. Moelle	er			
	First Name	Middle Name	Last Name		
Debtor 2	Marjorie A. Moell	er			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

,	Case 10-01700 DOC	Document Page 18 of 65	10 14.12.49 Desc Main
Fill in this in	formation to identify your case		
Debtor 1	Eugene A. Moeller		
Debior 1	First Name	Middle Name Last Name	
Debtor 2	Marjorie A. Moeller		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States	Bankruptcy Court for the: NC	RTHERN DISTRICT OF ILLINOIS	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	orm 106E/F		
Schedule	E/F: Creditors Who	Have Unsecured Claims	12/15
schedule G: Ex schedule D: Cr eft. Attach the	ecutory Contracts and Unexpired I editors Who Have Claims Secured	ould result in a claim. Also list executory contracts on Seases (Official Form 106G). Do not include any creditors y Property. If more space is needed, copy the Part you rou have no information to report in a Part, do not file that	with partially secured claims that are listed in eed, fill it out, number the entries in the boxes on the
Part 1: Lis	st All of Your PRIORITY Unsecu	red Claims	
1. Do any cre	editors have priority unsecured cla	ns against you?	
■ No. Go	to Part 2.		
☐ Yes.			
Part 2: Lis	st All of Your NONPRIORITY Ur	secured Claims	
3. Do any cre	editors have nonpriority unsecured	claims against you?	
☐ No. You	u have nothing to report in this part. S	bmit this form to the court with your other schedules.	
		•	
Yes.			
unsecured	claim, list the creditor separately for e	n the alphabetical order of the creditor who holds each a ch claim. For each claim listed, identify what type of claim it other creditors in Part 3.If you have more than three nonprio	is. Do not list claims already included in Part 1. If more
			Total claim
4.1 AAM	IS	Last 4 digits of account number 1445	\$446.38
Nonpr	iority Creditor's Name	<u> </u>	
	Mills Civic Pkwy #202	When was the debt incurred?	
	t Des Moines, IA 50265 er Street City State Zlp Code	As of the date you file, the claim is: Check all the	at apply
	ncurred the debt? Check one.	7.6 of the date you me, the diam let officer and	асарру
	ebtor 1 only	☐ Contingent	
_	ebtor 2 only	☐ Unliquidated	
	btor 1 and Debtor 2 only	☐ Disputed	
	least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_		□ 04d==4.l=====	
debt	eck if this claim is for a communit	☐ Obligations arising out of a separation agreem	ent or divorce that you did not
Is the ■ No		report as priority claims ☐ Debts to pension or profit-sharing plans, and o	ther similar debts
			THE SHITHER MEDIS
☐ Ye	S	■ Other. Specify Medical Services	

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	Eugene A. Moeller Marjorie A. Moeller	Case number (if know)	
4.2	Alliance One Receivables	Last 4 digits of account number 1324	\$1,816.39
	Nonpriority Creditor's Name 4850 Street Rd. Suite 300 Feasterville Trevose, PA 19053	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
	Allied Interstate LLC Nonpriority Creditor's Name	Last 4 digits of account number 2108	\$335.00
	P.O. Box 361445 Columbus, OH 43236	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
	Allied Interstate LLC	Last 4 digits of account number 9426	\$664.37
	Nonpriority Creditor's Name P.O. Box 361445 Columbus, OH 43236	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify PayPal Credit Account	

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	1 Eugene A. Moeller 2 Marjorie A. Moeller	Case number (if know)	
4.5	Alltran Financial LP	Last 4 digits of account number 0831	\$548.59
	Nonpriority Creditor's Name P.O. Box 610 Sauk Rapids, MN 56379-0610	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.6	American Coradius Internation LLC Nonpriority Creditor's Name	Last 4 digits of account number 3487	\$526.48
	2420 Sweet Home Road STE 150 Amberst, NY 14228-2244	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit card purchases	
		— Other. Specify	
4.7	Blatt, Hasenmiller, Leibsker, Moore Nonpriority Creditor's Name	Last 4 digits of account number 5922	\$1,176.83
	10 South LaSalle St. Suite 2200 Chicago, IL 60603-1069	When was the debt incurred?	
•	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit card purchases	
	□ 162	Other. Specify Orealt Card parchases	

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Debtor Debtor	1 Eugene A. Moeller 2 Marjorie A. Moeller	Case number (if	know)
4.8	Blatt, Hasenmiller, Leibsker, Moore Nonpriority Creditor's Name	Last 4 digits of account number 2567	\$3,207.84
	10 South LaSalle St. Suite 2200 Chicago, IL 60603-1069	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that ap	pply
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or report as priority claims	r divorce that you did not
	No	Debts to pension or profit-sharing plans, and other	similar debts
	Yes	Other. Specify Credit card purchases	
4.9	Capital One NA/Kohl's Dept. Stores Nonpriority Creditor's Name	Last 4 digits of account number	\$548.59
	P.O. Box 30285	When was the debt incurred?	
	Salt Lake City, UT 84130-0285	As a full a later on the districts Of the later	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that ap	оріу
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or report as priority claims	r divorce that you did not
	■ No	Debts to pension or profit-sharing plans, and other	similar debts
	☐ Yes	Other. Specify	
4.1	Centegra Hospital - McHenry	Last 4 digits of account number 3739	\$891.09
U	Nonpriority Creditor's Name 4201 Medical Center Drive	When was the debt incurred?	
	McHenry, IL 60050-8409 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that ap	pply
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or report as priority claims	r divorce that you did not
	No	☐ Debts to pension or profit-sharing plans, and other:	similar debts
	□Yes	■ Other. Specify Hospital Stay	
		- Other, Specify	

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Debt	or 2 Marjorie A. Moeller	Case number (if know)	
.1	Client Services	Last 4 digits of account number 1696	\$664.37
	Nonpriority Creditor's Name 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify PayPal	
l.1	Comenity Bank	Last 4 digits of account number 8840	\$357.53
2	Nonpriority Creditor's Name	Last 4 digits of account number 8840	ΨΟΟΙ .ΟΟ
	P.O. Box 183043	When was the debt incurred?	
	Columbus, OH 43218-3043 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Oneck all that apply	
	Debtor 1 only	Continued.	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	□ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
.1			
3	Comenity Bank	Last 4 digits of account number 6249	\$286.15
	Nonpriority Creditor's Name P.O. Box 183043 Columbus, OH 43218-3043	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No	· · · · · · · · · · · · · · · · · · ·	
	Yes	■ Other. Specify Credit card purchases	

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Debtor Debtor	1 Eugene A. Moeller 2 Marjorie A. Moeller	Case number (if know)	
4.1	Commenity Capital Bank	Last 4 digits of account number 0709	\$482.16
	Nonpriority Creditor's Name P.O. Box 183043 Columbus, OH 43218-3043	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
4.1 5	Convergent Outsourcing Nonpriority Creditor's Name	Last 4 digits of account number 8919	\$266.24
	800 SW 39th Street Renton, WA 98057	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	D & A Services Nonpriority Creditor's Name	Last 4 digits of account number 8454	\$1,776.83
	1400 E. Touhy Avenue Des Plaines, IL 60018	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

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Debtor Debtor	Eugene A. Moeller Marjorie A. Moeller	Case number (if know)	
4.1	Diversified Consultants, Inc.	Last 4 digits of account number 1078	\$432.11
	Nonpriority Creditor's Name P.O. Box 551268	When was the debt incurred?	
	Jacksonville, FL 32255-1268 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Cable Television	
4.1	ERC	Last 4 digits of account number 3940	\$491.08
	Nonpriority Creditor's Name P.O. Box 57610	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	_	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify PayPal	
4.1	ERC	Last 4 digits of account number 5537	\$548.59
	Nonpriority Creditor's Name P.O. Box 57610	When was the debt incurred?	
	Jacksonville, FL 32241 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check an that apply	
	Debtor 1 only	□ Constitution	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

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Debtor Debtor	1 Eugene A. Moeller 2 Marjorie A. Moeller		Case number (if know)	
4.2 0	First National Collection Bureau	Last 4 digits of account number	0812	\$266.24
	Nonpriority Creditor's Name P.O. Box 51660 Sparks, NV 89435	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.2	Global Credit & Collection Corp. Nonpriority Creditor's Name	Last 4 digits of account number	7303	\$664.37
	5440 N. Cumberland Ave. Suite 300 Orlando, FL 32896-5022	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify PayPal Cre	dit Account	
4.2	Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	7950	\$930.49
	P.O. Box 60578 Los Angeles, CA 90060	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Credit card	purchases	

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Debtor Debtor	Eugene A. Moeller Marjorie A. Moeller		Case number (if know)	
4.2	Midland Funding LLC	Last 4 digits of account number	7950	\$849.21
	Nonpriority Creditor's Name P.O. Box 60578 Los Angeles, CA 90060	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.2	Minuteman Financial Inc.	Last 4 digits of account number		\$300.00
	Nonpriority Creditor's Name P.O. Box 247 Fox Lake, IL 60020-0247	When was the debt incurred?		
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Free Consu	ultation	
4.2	NCB Management Services Inc.	Last 4 digits of account number	4216	\$3,207.84
	Nonpriority Creditor's Name P.O. Box 1099 Langhorne, PA 19047	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card	purchases	

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Debtor Debtor	1 Eugene A. Moeller 2 Marjorie A. Moeller	Case number (if know)	
4.2	Northland Group Inc.	Last 4 digits of account number 8658	\$3,578.08
	Nonpriority Creditor's Name P.O. Box 390846 Minneapolis, MN 55439	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.2	Northstar Location Services Nonpriority Creditor's Name	Last 4 digits of account number 4126	\$3,207.84
	4285 Genesee Street Buffalo, NY 14225	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.2	Northstar Location Services Nonpriority Creditor's Name	Last 4 digits of account number 8247	\$1,776.83
	4285 Genesee Street Buffalo, NY 14225	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

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Debtor Debtor	1 Eugene A. Moeller 2 Marjorie A. Moeller	Case number (if know)	
4.2	Portfolio Recovery	Last 4 digits of account number 8840	\$350.17
	Nonpriority Creditor's Name 120 Corporate Boulevard Norfolk, VA 23502	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
4.3	Portfolio Recovery	Last 4 digits of account number	\$391.91
	Nonpriority Creditor's Name 120 Corporate Boulevard Norfolk, VA 23502	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.3	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number0534	\$391.91
	120 Corporate Boulevard Norfolk, VA 23502	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

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Debtor Debtor	Eugene A. Moeller Marjorie A. Moeller		Case number (if know)	
4.3	Portfolio Recovery Associates LLC	Last 4 digits of account number	8840	\$350.17
	Nonpriority Creditor's Name P.O. Box 12914 Norfolk, VA 23541	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.3	Portfolio Recovery Associates LLC Nonpriority Creditor's Name	Last 4 digits of account number	9426	\$664.37
	120 Corporate Blvd. Norfolk, VA 23502	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify PayPal		
4.3	Professional Bureau of Collections Nonpriority Creditor's Name	Last 4 digits of account number	5900	\$357.53
	P.O. Box 4157 Greenwood Village, CO 80155	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	purchases	

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Debtor 2 Marjorie A. Moeller Case number (if know) 4.3 \$526.48 Simm Associates Inc. 3543 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 7526 When was the debt incurred? Newark, DE 19714-7526 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify PayPal Credit Account Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Barclay's Bank of Delaware Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 125 S. West Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19801 Last 4 digits of account number 4126 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Barclay's Bank of Delaware** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 125 S. West Street Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19801 Last 4 digits of account number 5922 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Barclay's Bank of Delaware Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 125 S. West Street Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19801 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Barclays Bank Delaware** Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 125 South West Street Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19801 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Barclays Bank Delaware** Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 125 South West Street Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19801 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Barclays Bank Delaware** Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 125 South West Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19801 Last 4 digits of account number 8247 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank (USA) N.A. Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 6492 ■ Part 2: Creditors with Nonpriority Unsecured Claims Carol Stream, IL 60197 Last 4 digits of account number 1324

Debtor 1 Eugene A. Moeller

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Debtor 1 Eugene A. Moeller Debtor 2 Marjorie A. Moeller		Case number (if know)	
Name and Address	On which entry in Part 1 or Part 2 d	·	
Capital One Bank (USA) N.A. P.O. Box 6492	Line <u>4.26</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Carol Stream, IL 60197		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	8599	
Name and Address	On which entry in Part 1 or Part 2 d	· ·	
Capital One NA/Kohl's Dept. Stores P.O. Box 30285	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Salt Lake City, UT 84130-0285		■ Part 2: Creditors with Nonpriority Unsecured Claims	
•	Last 4 digits of account number	9552	
Name and Address	On which entry in Part 1 or Part 2 d	· ·	
Capital One NA/Kohl's Dept. Stores P.O. Box 30285	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Salt Lake City, UT 84130-0285		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	4095	
Name and Address	On which entry in Part 1 or Part 2 d	· ·	
Capital One Services P.O. Box 30285	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Salt Lake City, UT 84130-0285		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	5537	
Name and Address	On which entry in Part 1 or Part 2 d		
Centegra Hospital - McHenry 4201 Medical Center Drive	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
McHenry, IL 60051-1570		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	7591	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Comcast P.O. Box 3001	Line 4.17 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Southeastern, PA 19398		■ Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number	7564	
Name and Address	On which entry in Part 1 or Part 2 d		
Comenity Bank P.O. Box 183043	Line 4.29 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43218-3043		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	8840	
Name and Address	On which entry in Part 1 or Part 2 d	· ·	
Comenity Bank P.O. Box 183043	Line 4.32 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43218-3043		■ Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number	8840	
Name and Address	On which entry in Part 1 or Part 2 d	·	
Commenity Bank/VCTSSEL P.O. Box 183043	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43218-3043		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d		
Commenity Bank/VCTSSEL P.O. Box 183043	Line 4.34 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43218		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	8840	
Name and Address	On which entry in Part 1 or Part 2 d	· <u> </u>	
Commenity Capital Bank P.O. Box 183043	Line 4.35 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Columbus, OH 43218-3043		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	3487	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	

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Debtor 1 Eugene A. Moeller Debtor 2 Marjorie A. Moeller		Case number (if know)	
Credit One Bank	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 60500		■ Part 2: Creditors with Nonpriority Unsecured Claims	
City of Industry, CA 91716-0500	Last 4 digits of account number	7950	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Credit One Bank	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 60500 City of Industry, CA 91716-0500		■ Part 2: Creditors with Nonpriority Unsecured Claims	
City of industry, OA 317 10-0300	Last 4 digits of account number	7950	
Name and Address Jefferson Captial Systems, LLC	On which entry in Part 1 or Part 2 d Line 4.15 of (<i>Check one</i>):	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
16 McLeland Road		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Saint Cloud, MN 56303	Last 4 digits of account number	0827	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Synchrony Bank - PayPal	Line 4.33 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 965004		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Orlando, FL 32896-5004	Last 4 digits of account number	9426	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Synchrony Bank - PayPal	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 965022		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Orlando, FL 32896-5022	Last 4 digits of account number	9426	
Name and Address	On which entry in Part 1 or Part 2 d		
Synchrony Bank - PayPal	Line <u>4.21</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 965022 Orlando, FL 32896-5004		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Change, 1 2 02000 000-7	Last 4 digits of account number	9426	
Name and Address	On which entry in Part 1 or Part 2 d	· ·	
Synchrony Bank - Walmart P.O. Box 965064	Line 4.30 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Orlando, FL 32896-5064		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0534	
Name and Address	On which entry in Part 1 or Part 2 d		
Synchrony Bank - Walmart P.O. Box 965022	Line <u>4.3</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Orlando, FL 32896-5022		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0534	
Name and Address	On which entry in Part 1 or Part 2 d		
Synchrony Bank - Walmart P.O. Box 965004	Line 4.31 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Orlando, FL 32896-5004		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0534	
Name and Address Synchrony Bank-Pay Pall	On which entry in Part 1 or Part 2 d Line 4.4 of (Check one):	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 965004	Line 4.4 of (Check one).	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Orlando, FL 32896-5004			
	Last 4 digits of account number	9424	
Name and Address	On which entry in Part 1 or Part 2 d	· ·	
Webbank 215 South State Street, Suite 1000.	Line 4.20 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Salt Lake City, UT 84111		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0827	

Part 4: Add the Amounts for Each Type of Unsecured Claim

Official Form 106 E/F

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Debtor 1 Eugene A. Moeller
Debtor 2 Marjorie A. Moeller Case number (if know)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 33,280.06
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 33,280.06

			111 FAUE 34 01 03	
Fill in this inform	mation to identify your	case:		
Debtor 1	Eugene A. Moelle	er		
	First Name	Middle Name	Last Name	
Debtor 2	Marjorie A. Moell	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for		
2.1							
	Name						
	Number	Street					
	City		State	ZIP Code	<u> </u>		
2.2							
	Name						
	Number	Street					
	City		State	ZIP Code	_		
2.3	Oity		Otato	Zii Oddo			
	Name						
	Number	Street					
	City		State	ZIP Code	_		
2.4							
	Name				<u> </u>		
	Number	Street			<u> </u>		
	City		State	ZIP Code	_		
2.5	- 1.7						
	Name				_		
	Number	Street					
	City		State	ZIP Code	<u> </u>		

		Docume	ent Page 35 d	of 65
Fill in this	information to identify your	case:		
Debtor 1	Fugana A Maall	O.W.		
Depioi i	Eugene A. Moell First Name	Middle Name	Last Name	
Debtor 2	Marjorie A. Moel	ler		
(Spouse if, filing		Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Casa numb				
Case numb				☐ Check if this is an
				amended filing
Codebtors a people are a fill it out, ar your name 1. Do y No Yes 2. With Arizona	filing together, both are equited number the entries in the and case number (if known out have any codebtors? (If	are also liable for any debually responsible for suppe boxes on the left. Attack Answer every question you are filing a joint case, u lived in a community pr	olying correct informate the Additional Page to the Addition	y? (Community property states and territories include
3. In Colu in line Form 1	2 again as a codebtor only	otors. Do not include your if that person is a guaran	spouse as a codebtor tor or cosigner. Make	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to f
	Column 1: Your codebtor lame, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
				Chook an obligation that apply?
3.1				Schedule D, line
N	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
(City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			Schedule D, line ☐ Schedule E/F, line
				☐ Schedule C, line
_				
	Number Street	Stato	ZID Codo	
(City	State	ZIP Code	

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Debtor 1	Eugene A. M	Moeller			
Debtor 2 (Spouse, if filing)	Marjorie A.	Moeller			
United States Bank	ruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		
Case number (If known)				Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:	
Official For				MM / DD/ YYYY	
Schedule I				12/1 and Debtor 2), both are equally responsible for	
ittach a separate s	separated and you	r spouse is not filing wi	ith you, do not include informat	ring with you, include information about your on about your spouse. If more space is needed, d case number (if known). Answer every question	
attach a separate s	separated and you heet to this form.	r spouse is not filing wi	ith you, do not include informat	on about your spouse. If more space is needed,	
Part 1: Desc	separated and you heet to this form.	r spouse is not filing wi	ith you, do not include informat	on about your spouse. If more space is needed,	
Part 1: Desc 1. Fill in your en information. If you have mo	separated and you heet to this form. ribe Employment nployment ore than one job,	ir spouse is not filing w On the top of any additi	ith you, do not include informat onal pages, write your name an	on about your spouse. If more space is needed, d case number (if known). Answer every question	
Part 1: Desc 1. Fill in your en information. If you have mo attach a separinformation ab	separated and you heet to this form. ribe Employment nployment ore than one job, ate page with	r spouse is not filing wi	ith you, do not include informat onal pages, write your name an Debtor 1	on about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse	
Part 1: Desc 1. Fill in your en information. If you have mo attach a separ.	separated and you heet to this form. ribe Employment nployment ore than one job, ate page with	ir spouse is not filing w On the top of any additi	Debtor 1 Employed	on about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed	
Part 1: Desc 1. Fill in your en information. If you have mo attach a separ information ab employers.	separated and you heet to this form. ribe Employment nployment ore than one job, ate page with out additional me, seasonal, or	r spouse is not filing wi On the top of any additi	Debtor 1 Employed Not employed	on about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed	
Part 1: Desc 1. Fill in your en information. If you have mo attach a separ information ab employers. Include part-tir self-employed	separated and you heet to this form. ribe Employment pre than one job, ate page with out additional me, seasonal, or work. ay include student	r spouse is not filing with the top of any addition the top of any additional top of any addition the top of a top of	Debtor 1 Employed Not employed Paper Route Driver	on about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed	
Part 1: Desc 1. Fill in your en information. If you have mo attach a separ information ab employers. Include part-tir self-employed Occupation ma	separated and you heet to this form. ribe Employment pre than one job, ate page with out additional me, seasonal, or work. ay include student	er spouse is not filing with the top of any addition to the top of any additional top of any additional top of any additional to the top of any additional top of a support and additional top of a support additional top of a support and additional top of a support	Debtor 1 Employed Not employed Paper Route Driver Fox Area Distribution Inc. 11517 Charles Road Woodstock, IL 60098	on about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed	
Part 1: Desc 1. Fill in your en information. If you have mo attach a separinformation ab employers. Include part-tir self-employed Occupation ma or homemaker	separated and you heet to this form. ribe Employment pre than one job, ate page with out additional me, seasonal, or work. ay include student	Employment status Occupation Employer's name Employer's address How long employed t	Debtor 1 Employed Not employed Paper Route Driver Fox Area Distribution Inc. 11517 Charles Road Woodstock, IL 60098	on about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed	

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

			non-f	iling spouse
2.	\$	619.97	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	619.97	\$_	0.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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	otor 1 otor 2	Eugene A. Moeller Marjorie A. Moeller	-	(Cas	e number (<i>if known</i>)	_				
						or Debtor 1		For Debtor	spouse		
	Cop	y line 4 here	4.		\$_	619.97	-	\$	0.0	0	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	а.	\$	0.00		\$	0.0	0	
	5b.	Mandatory contributions for retirement plans	51		\$	0.00	_	\$	0.0		
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0.00	-	\$	0.0		
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	_	\$	0.0		
	5e.	Insurance	56	е.	\$	0.00	-	\$	0.0	0	
	5f.	Domestic support obligations	5f	f.	\$	0.00		\$	0.0	0	
	5g.	Union dues	5	g.	\$	0.00		\$	0.0	0	
	5h.	Other deductions. Specify:	_ 5I	h.+	\$_	0.00	+	\$	0.0	0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00		\$	0.0	0	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	619.97	-	\$	0.0	0	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			_					_	
	O.L.	monthly net income.	88		\$_	0.00	_	\$	0.0		
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8I 80		\$_ \$	0.00	-	\$ \$	0.0		
	8d.	Unemployment compensation	80		\$	0.00	_	\$	0.0	_	
	8e.	Social Security	86		\$	1,783.30	_	·	,200.5		
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	81 80		\$_	0.00	-	\$ \$	0.0	00	
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_	0.00	+	\$	0.0	0	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	1,783.30		\$	1,200.	50	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,403.27 + \$	-	1,200.50	= \$	3 6	603.77
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		Σ,403.27	_	1,200.30	-		,03.77
11.	Incl othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep			•		l in <i>Schedul</i>	le J. +\$ _		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	3,6	603.77
13.	Do :	you expect an increase or decrease within the year after you file this form	?						Comb	oined hly ind	come
		No. Yes. Explain:					—				

Official Form 106I Schedule I: Your Income page 2

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TEHT	in this informs	tion to identify w	0. III 00001			ı		
FIII	in this informa	ition to identify yo	our case:					
Deb	otor 1	Eugene A. M	loeller			_	eck if this is:	ilia a
	otor 2 ouse, if filing)	Marjorie A. I	Moeller					showing postpetition chapter as of the following date:
Unit	ted States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YY	YY
1	se number (nown)							
0	fficial Fo	rm 106J				•		
S	chedule	J: Your	Exper	ises				12/1
Be info	as complete a ormation. If m mber (if know	and accurate as lore space is ne n). Answer eve	s possible. eded, atta ry questio	If two married people ar	e filing together, bo form. On the top of	oth are ed any addi	qually responsik tional pages, w	ole for supplying correct
Par 1.	t 1: Descr Is this a joir	ribe Your House	∌hold					
••	□ No. Go to							
	Yes. Doe	s Debtor 2 live	in a separ	ate household?				
	■ N		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	ehtor 2	
_				a o 1000 <u>2, 2<i>n</i>po</u> neco				
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent age	's Does dependent live with you?
	Do not state dependents						_	□ No □ Yes □ No □ Yes
								□ No □ Yes □ No
3.	expenses of	penses include f people other t d your depende	than 👝	No Yes			_	Yes
Est	timate your ex		our bankrı	uptcy filing date unless y				Chapter 13 case to report op of the form and fill in the
the		h assistance an		government assistance in luded it on <i>Schedule I:</i> Y			Your	expenses
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$	1,000.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.		0.00
				ipkeep expenses		4c.		0.00
5.		owner's associat		dominium dues o ur residence , such as ho	me equity loans	4d. 5.	·	0.00

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Eugene A. Moeller Mariorie A. Moeller	Case number (if known)	
	tate names (ii mionii)	
es:		
Electricity, heat, natural gas	6a. \$	242.75
	· —	72.00
	· —	280.00
		0.00
. •	· —	525.00
	·	0.00
	· —	10.00
•	· · ·	50.00
•	11. \$	150.00
	12. \$	362.00
ainment, clubs, recreation, newspapers, magazines, and books	13. \$	44.00
able contributions and religious donations	14. \$	0.00
ance.	· ·	
t include insurance deducted from your pay or included in lines 4 or 20.		
Life insurance	15a. \$	137.00
Health insurance	15b. \$	473.00
Vehicle insurance	15c. \$	189.00
Other insurance. Specify:	15d. \$	0.00
Do not include taxes deducted from your pay or included in lines 4 or 20.		
<u> </u>	16. \$	0.00
	170 ¢	0.00
	· <u> </u>	0.00
• •	· · · · ·	
		0.00
	·	0.00
		0.00
		0.00
	· —	0.00
,		
Mortgages on other property	20a. \$	0.00
Real estate taxes	20b. \$	0.00
Property, homeowner's, or renter's insurance	20c. \$	0.00
Maintenance, repair, and upkeep expenses	20d. \$	0.00
Homeowner's association or condominium dues	20e. \$	0.00
: Specify:	21. +\$	0.00
late your monthly expenses		
dd lines 4 through 21.	\$	3,534.75
· · · · · · · · · · · · · · · · · · ·		3,00 9
		3,534.75
, , ,	Ψ	3,334.13
late your monthly net income.		
13 0		3,603.77
Copy your monthly expenses from line 22c above.	23b\$	3,534.75
Subtract your monthly expenses from your monthly income.		
	23c. \$	69.02
The result is your monthly net income.	200.	
u expect an increase or decrease in your expenses within the year aft ample, do you expect to finish paying for your car loan within the year or do you expec	er you file this form?	ease or decrease because
u expect an increase or decrease in your expenses within the year aft	er you file this form?	ease or decrease because o
	Marjorie A. Moeller Se: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ng, laundry, and dry cleaning nal care products and services all and dental expenses portation. Include gas, maintenance, bus or train fare. I include car payments. I include car payments. I include contributions and religious donations Ince. I include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. I include insurance of the insurance of the insurance of the insurance. Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Dayments for Vehicle 2 Other. Specify: Dayments of alimony, maintenance, and support that you did not repointed from your pay on line 5, Schedule I, Your Income (Official Form 10 payments you make to support others who do not live with you. I impayments you make to support others who do not live with you. I impayments you make to support others who do not live with you. I impayments you make to support others who do not live with you. I impayments you make to support others who do not live with you. I impayments you make to support others who do not live with you. I impayments you make you not included in lines 4 or 5 of this form or on a live with you. I impayments you make you or you or you	Barjorie A. Moeller Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cher. Specify: Gd. \$ Sara and chusekeeping supplies Fare and children's education costs Fare and dental expenses Fortation. Include gas, maintenance, bus or train fare. Finclude car payments. Finclude car payments for Vehicle 2 Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes deducted from your pay or included in lines 4 or 20. Finclude taxes payments. Finclude car payments for Vehicle 2 Finclude car payments for Vehicle 1 Finclude car payments for Vehicle 1

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Fill in t	his inforr	nation to identify your	case:			
Debtor	1	Eugene A. Moelle	er			
		First Name	Middle Name	Last Name		
Debtor	2	Marjorie A. Moelle	er			
(Spouse if	f, filing)	First Name	Middle Name	Last Name		
United :	States Ba	nkruptcy Court for the:	NORTHERN DISTRICT O	FILLINOIS		
Case ni	umber					
(if known)	_				☐ Chec	k if this is an
					amen	nded filing
ou mus	st file thing ng money	s form whenever you fi	n connection with a bankru	r amended schedules. Mak	nformation. king a false statement, concealing es up to \$250,000, or imprisonm	
	Sign	n Below				
Di	d you pa	y or agree to pay some	one who is NOT an attorne	ey to help you fill out bankr	uptcy forms?	
	No					
	Yes. N	Name of person			Attach Bankruptcy Petition F	Preparer's Notice,
					Declaration, and Signature (Official Form 119)
tha	t they are	Ity of perjury, I declare e true and correct. gene A. Moeller e A. Moeller	that I have read the summa	ary and schedules filed wit X /s/ Marjorie A. Marjorie A. Mo	Moeller	
		re of Debtor 1		Signature of Debt		
	Date _	August 10, 2018		Date August 1	10, 2018	

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	n this inform	nation to identify you	. casa:			
Debt		Eugene A. Moell				
DODE	OI I	First Name	Middle Name	Last Name		
Debt	or 2 se if, filing)	Marjorie A. Moel	ler Middle Name	Last Name		
		nkruptcy Court for the:	NORTHERN DISTRICT			
Office	eu States Dai	ikiupicy Court for the.	HORTIERN DISTRICT	OI ILLINOIS		
Case (if know	e number wn)				_	theck if this is an mended filing
Sta Be as	complete a	of Financial	ble. If two married people a		equally responsible for sup	
		ore space is needed, n). Answer every ques		this form. On the top of an	γ additional pages, write yoυ	ır name and case
Part	1: Give D	etails About Your Ma	rital Status and Where You	ı Lived Before		
1. \	What is you	current marital statu	s?			
 	■ Married □ Not mar	ried				
2. I	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
 	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
 	■ No □ Yes. Ma	ike sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
I	□ No					
I	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calenda uary 1 to De	r year: cember 31, 2017)	■ Wages, commissions, bonuses, tips	\$1,727.66	☐ Wages, commissions, bonuses, tips	\$800.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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		ugene A. M Iarjorie A. N				Case	e number (if known)		
				Daliford			Dalitan 0		
				Sources of income Check all that apply.	Gross income (before deductions exclusions)	s and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	January 1 to December 31 2016)		■ Wages, commissions, bonuses, tips	\$6,38	88.31	☐ Wages, com bonuses, tips	missions,	\$2,600.00	
				☐ Operating a business			☐ Operating a	business	
		ndar year: o December :	31, 2015)	■ Wages, commissions, bonuses, tips	\$3,27	76.75	☐ Wages, com bonuses, tips	missions,	\$1,500.00
				☐ Operating a business			Operating a	business	
	List each		he gross inco	se and you have income that yome from each source separa	· ·		nat you listed in lin		
				Debtor 1	Ouese in		Debtor 2		Onese in serve
				Sources of income Describe below.	Gross income fro each source (before deductions exclusions)		Sources of inc. Describe below.		Gross income (before deductions and exclusions)
Par	t 3: Lis	st Certain Pa	yments You	Made Before You Filed for	Bankruptcy				
i.	□ No.	Neither De individual puring the No. Yes * Subject to Debtor 1 co	goton 1 nor Eprimarily for a goton line 7 List below a include pay	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 year or both have primarily consumer or you filed for bankruptcy, di	Imer debts. Consumated purpose." d you pay any credited a total of \$6,425* onts for domestic supports bankruptcy case. In a feet that for cases in the debts. d you pay any credited a total of \$600 or metal to the debts.	or a total or more in ort obliga filed on or a total	of \$6,425* or more pay ations, such as chor after the date of of \$600 or more?	re? ments and ti ild support a f adjustment	he total amount you and alimony. Also, do .
	Credito	r's Name and	d Address	Dates of payme	nt Total amo	ount	Amount you	Was this r	payment for
	Ordano	. J Haine and	. , tuul 600	Dates of payme		paid	still owe	7145 1113	Jay.110111 101 111

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Debtor	Marjorie A. Moeller		Cas	se number (if known)		
<i>Ins</i> of a l	ithin 1 year before you filed for bankrupt siders include your relatives; any general pa which you are an officer, director, person in business you operate as a sole proprietor. 1 mony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	Il partner; corporation gent, including one fo
	. 110					
□ Ir	Yes. List all payments to an insider. nsider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	isiaci s Name ana Adaress	bates of payment	paid	still owe	ricuson for	ino paymoni
in	ithin 1 year before you filed for bankrupt sider? clude payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	. 140					
Ir	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Part 4	Identify Legal Actions, Repossession	ns, and Foreclosures				
Lis	ithin 1 year before you filed for bankrupt st all such matters, including personal injury odifications, and contract disputes.					
□	No Yes. Fill in the details.					
	case title	Nature of the case	Court or agency		Status of th	e case
V N	Capital One Bank USA s Margorie A. Moeller 7 SC 699	Small Claims	McHenry Coun Government C 2200 N. Semina Woodstock, IL	enter ary Avenue	■ Pending □ On appe □ Conclude	
В	Midland Funding for Credit One	Small Claims	McHenry Coun	enter	■ Pending □ On appe	al
N	s Margorie A. Moeller 7SC933		2200 N. Semina Woodstock, IL		☐ Conclude	∍d
	ithin 1 year before you filed for bankrupt neck all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?
	No. Go to line 11.					
-	Yes. Fill in the information below.					
C	reditor Name and Address	Describe the Property		Date		Value of the property
_	ifth Third Donk Mortgogo	Explain what happened	d			¢20,000,00
5	ifth Third Bank Mortgage 050 Kingsley Drive	Single Family Home				\$20,000.00
C	Cincinnati, OH 45263	Property was repossed				
		■ Property was foreclos□ Property was garnish				
		☐ Property was attache				
_						

Eugene A. Moeller

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	btor 1 Eugene A. Moeller btor 2 Marjorie A. Moeller	Case number	(if known)
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.	otcy, did any creditor, including a bank or financial ins ause you owed a debt?	stitution, set off any amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was Amount taken
12.	court-appointed receiver, a custodian, or a	cy, was any of your property in the possession of an a nother official?	assignee for the benefit of creditors, a
	■ No □ Yes		
Par	tt 5: List Certain Gifts and Contributions		
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more t	nan \$600 per person?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts Value
	Person to Whom You Gave the Gift and Address:		
14.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cor	tcy, did you give any gifts or contributions with a tota	l value of more than \$600 to any charity?
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you Value contributed
Par	rt 6: List Certain Losses		
15.	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankruptcy, did you lose any	hing because of theft, fire, other disaster,
	■ No □ Yes. Fill in the details.		
	how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss Value of property lost
Par	tt 7: List Certain Payments or Transfers		
16.	consulted about seeking bankruptcy or pro	cy, did you or anyone else acting on your behalf pay or paring a bankruptcy petition? parers, or credit counseling agencies for services required	
	□ No■ Yes. Fill in the details.		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment Amount of or transfer was payment made
	Law Office of Scott A. Bentley 5435 Bull Valley Road Suite 318 McHenry, IL 60050 scottbentleylaw@gmail.com	Attorney Fees	\$2,000.00

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Debtor 1 Eugene A. Moeller
Debtor 2 Marjorie A. Moeller

Case number (if known)

17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo	ors or to make payments			rty to anyone who				
	Yes. Fill in the details.								
				D .					
	Person Who Was Paid Address	transferred	alue of any propert	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b			er any property to anyone, othe	r than property				
	Include both outright transfers and transfers m include gifts and transfers that you have alread No	ade as security (such as t	he granting of a secu	urity interest or mortgage on your	property). Do not				
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and v property transferr		Describe any property or payments received or debts paid in exchange	Date transfer was made				
	Person's relationship to you			paid in exchange					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro-		y property to a self	-settled trust or similar device	of which you are a				
	■ No								
	Yes. Fill in the details.								
	Name of trust	Description and v	alue of the propert	y transferred	Date Transfer was made				
Par	List of Certain Financial Accounts, In	struments, Safe Deposit	Boxes, and Storag	ge Units					
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accour	nts; certificates of o						
	_ ''	ciations, and other illiar	iciai iristitutioris.						
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any sa	afe deposit box or other depos	itory for securities,				
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?				
22.	Have you stored property in a storage unit	or place other than your	home within 1 yea	r before you filed for bankrupto	cy?				
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?				
		aa _ii							

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Debtor 1 Eugene A. Moeller
Debtor 2 Marjorie A. Moeller

Case number (if known)

Par	t 9:	Identify Property You Hold or Control for	Someone Else					
23.		you hold or control any property that someosomeone.	one else owns? Include any prope	rty y	ou borrowed from, are storing fo	r, or hold in trust		
		No						
		Yes. Fill in the details.						
		wner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10	Give Details About Environmental Information	ation					
For	the	purpose of Part 10, the following definitions	apply:					
	tox	vironmental law means any federal, state, or ic substances, wastes, or material into the a julations controlling the cleanup of these sul	ir, land, soil, surface water, ground	_	•			
		e means any location, facility, or property as own, operate, or utilize it, including disposal		law,	whether you now own, operate,	or utilize it or used		
		zardous material means anything an environ cardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic	substance,		
Rep	ort a	all notices, releases, and proceedings that ye	ou know about, regardless of whe	n the	ey occurred.			
24.	Ha	s any governmental unit notified you that yo	u may be liable or potentially liable	a unc	der or in violation of an environm	ental law?		
		No Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code)					Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.						
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice		
26.	Ha	ve you been a party in any judicial or admini	strative proceeding under any env	ironi	mental law? Include settlements	and orders.		
		No						
		Yes. Fill in the details.						
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11	: Give Details About Your Business or Con	nections to Any Business					
27.	Wit	thin 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	f the following connections to an	y business?		
		☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	, eith	ner full-time or part-time			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership	••	- •	•			
		☐ An officer, director, or managing execu	tive of a corporation					
		☐ An owner of at least 5% of the voting or	-					

Entered 08/10/18 14:12:49 Case 18-81708 Doc 1 Filed 08/10/18 Desc Main Document Page 47 of 65 **Eugene A. Moeller** Debtor 1 Debtor 2 Marjorie A. Moeller Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Eugene A. Moeller /s/ Marjorie A. Moeller **Eugene A. Moeller** Marjorie A. Moeller Signature of Debtor 1 Signature of Debtor 2 Date August 10, 2018 Date August 10, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

■ No

☐ Yes. Name of Person

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$2,000.00 toward the flat fee, leaving a balance due of \$2,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:August 10, 2018	
Signed:	
/s/ Eugene A. Moeller	/s/ Scott A. Bentley
Eugene A. Moeller	Scott A. Bentley
	Attorney for the Debtor(s)
/s/ Marjorie A. Moeller	•
Marjorie A. Moeller	
Debtor(s)	

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	Eugene A. Moeller re Marjorie A. Moeller		Case No.		
	marjorio A. moonor	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	2,000.00	
	Balance Due		\$	2,000.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comper	nsation with any other person	unless they are mem	bers and associates of my law firn	ì.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				
5.	In return for the above-disclosed fee, I have agreed to reno	der legal service for all aspect	s of the bankruptcy of	ase, including:	
	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, statenc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	may be required;		
	Negotiations with secured creditors to red reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hous	s as needed; preparation	emption planning and filing of moti	preparation and filing of ons pursuant to 11 USC	
5.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay actions o	ſ
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in	
	August 10, 2018	/s/ Scott A. Bentl	ey		
	Date	Scott A. Bentley Signature of Attorne			
		Law Office of Sco			
		5435 Bull Valley			
		McHenry, IL 6005 815-385-0669 Fa			
		scottbentleylaw@			
		Name of law firm			

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United States Bankruptcy Court Northern District of Illinois

In re	Eugene A. Moeller Marjorie A. Moeller		Case No.	
	•	Debtor(s)	Chapter	13
	VEI	RIFICATION OF CREDITOR M Number of		64
		1,0000000		
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of credit	ors is true and	correct to the best of my
Date:	August 10, 2018	/s/ Eugene A. Moeller Eugene A. Moeller		
		Signature of Debtor		
Date:	August 10, 2018	/s/ Marjorie A. Moeller		
		Marjorie A. Moeller Signature of Debtor		

AAMS
4800 Mills Civic Pkwy #202
West Des Moines, IA 50265

Alliance One Receivables 4850 Street Rd. Suite 300 Feasterville Trevose, PA 19053

Allied Interstate LLC P.O. Box 361445 Columbus, OH 43236

Allied Interstate LLC P.O. Box 361445 Columbus, OH 43236

Alltran Financial LP P.O. Box 610 Sauk Rapids, MN 56379-0610

American Coradius Internation LLC 2420 Sweet Home Road STE 150 Amberst, NY 14228-2244

Barclay's Bank of Delaware 125 S. West Street Wilmington, DE 19801

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Barclay's Bank of Delaware 125 S. West Street Wilmington, DE 19801

Barclays Bank Delaware 125 South West Street Wilmington, DE 19801

Barclays Bank Delaware 125 South West Street Wilmington, DE 19801 Barclays Bank Delaware 125 South West Street Wilmington, DE 19801

Blatt, Hasenmiller, Leibsker, Moore 10 South LaSalle St. Suite 2200 Chicago, IL 60603-1069

Blatt, Hasenmiller, Leibsker, Moore 10 South LaSalle St. Suite 2200 Chicago, IL 60603-1069

Capital One Bank (USA) N.A. P.O. Box 6492 Carol Stream, IL 60197

Capital One Bank (USA) N.A. P.O. Box 6492 Carol Stream, IL 60197

Capital One NA/Kohl's Dept. Stores P.O. Box 30285 Salt Lake City, UT 84130-0285

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Capital One Services P.O. Box 30285 Salt Lake City, UT 84130-0285

Centegra Hospital - McHenry 4201 Medical Center Drive McHenry, IL 60050-8409

Centegra Hospital - McHenry 4201 Medical Center Drive McHenry, IL 60051-1570 Client Services 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047

Comcast P.O. Box 3001 Southeastern, PA 19398

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Commenity Bank/VCTSSEL P.O. Box 183043 Columbus, OH 43218

Commenity Capital Bank P.O. Box 183043 Columbus, OH 43218-3043

Commenity Capital Bank P.O. Box 183043 Columbus, OH 43218-3043

Convergent Outsourcing 800 SW 39th Street Renton, WA 98057 Credit One Bank
P.O. Box 60500
City of Industry, CA 91716-0500

Credit One Bank
P.O. Box 60500
City of Industry, CA 91716-0500

D & A Services 1400 E. Touhy Avenue Des Plaines, IL 60018

Diversified Consultants, Inc. P.O. Box 551268
Jacksonville, FL 32255-1268

ERC
P.O. Box 57610
Jacksonville, FL 32241

ERC P.O. Box 57610 Jacksonville, FL 32241

First National Collection Bureau P.O. Box 51660 Sparks, NV 89435

Global Credit & Collection Corp. 5440 N. Cumberland Ave. Suite 300 Orlando, FL 32896-5022

Jefferson Captial Systems, LLC 16 McLeland Road Saint Cloud, MN 56303

Midland Funding LLC P.O. Box 60578 Los Angeles, CA 90060

Midland Funding LLC P.O. Box 60578 Los Angeles, CA 90060

Minuteman Financial Inc. P.O. Box 247 Fox Lake, IL 60020-0247

NCB Management Services Inc. P.O. Box 1099 Langhorne, PA 19047

Northland Group Inc. P.O. Box 390846 Minneapolis, MN 55439

Northstar Location Services 4285 Genesee Street Buffalo, NY 14225

Northstar Location Services 4285 Genesee Street Buffalo, NY 14225

Portfolio Recovery 120 Corporate Boulevard Norfolk, VA 23502

Portfolio Recovery 120 Corporate Boulevard Norfolk, VA 23502

Portfolio Recovery 120 Corporate Boulevard Norfolk, VA 23502

Portfolio Recovery Associates LLC P.O. Box 12914 Norfolk, VA 23541

Portfolio Recovery Associates LLC 120 Corporate Blvd. Norfolk, VA 23502

Professional Bureau of Collections P.O. Box 4157 Greenwood Village, CO 80155 Simm Associates Inc. P.O. Box 7526 Newark, DE 19714-7526

Synchrony Bank - PayPal P.O. Box 965004 Orlando, FL 32896-5004

Synchrony Bank - PayPal P.O. Box 965022 Orlando, FL 32896-5022

Synchrony Bank - PayPal P.O. Box 965022 Orlando, FL 32896-5004

Synchrony Bank - Walmart P.O. Box 965064 Orlando, FL 32896-5064

Synchrony Bank - Walmart P.O. Box 965022 Orlando, FL 32896-5022

Synchrony Bank - Walmart P.O. Box 965004 Orlando, FL 32896-5004

Synchrony Bank-Pay Pall P.O. Box 965004 Orlando, FL 32896-5004

Webbank 215 South State Street, Suite 1000. Salt Lake City, UT 84111